towe Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

File with:

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Effective January 1, 2010, all statements and reports fied by new committees for state office must be filed electronically and affective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

Reset Form

P. 2

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CAMPAIGN DISCLOSURE B.

2010 FEB 14 PM 1:35

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COMMITTEE NAME (Must be same as on Statement of	Organization)			
Committee to Elect Chuck Larson		DR-2 DISCLOSURE		
IMPORTANT: Indicate by # type of committee you are reporting (1) Statewidg/Logislative/Judge Standing for Retention Candid (4) County Central Committee (5) County Candidate (6) City Subdivision Candidate (8) County PAC (9) City PAC (10) Statement (10) City PAC (10) C	milities you are reporting for: 5 g for Retention Candidate (2)State PAC (3)State Party ty Candidate (6)City Candidate (7)School Sound or Other Political (9)City PAC (10)School Board or Other Political Subdivision PAC (
CANDIDATE COMMITTEES ONLY: Candidata Name	Political Party (if applicable)	Logged in Sommer Computer		
Office Sought	District (if Sensite or House)	Audited		
ete reports are subject to possible civil and criminal penalties candidate's committee, and the chairperson, for any other type the subject to possible civil and criminal penalties candidate's committee, and the chairperson, for any other type subject to possible civil and criminal penalties candidate's committee civil and criminal penalties candidate's committee, and the chairperson, for any other type candidate's committee civil and criminal penalties candidate's committee, and the chairperson, for any other type candidate's committee civil and criminal penalties candidate's committee.	s. Pursuant to lowe Code sections 68B.32A(7) se of committee, is the individual responsible for the individual responsible f	and 68A.401(3), the candidate, for a priling timety and accurate reports. 2///20/0 DATE SIGNED		
AM FILING A January 19, 2010	REPORT FOR (1) ELECTION /(Z)NON-ELECTION YEAR.		
(report date)	Indicate by #	2		
CHECK IF AMENDMENT TO REPORT DATED	•	ocal Committees, enter Date of Election		
(You must continue to file reports until a DR-3		ich Election in held FRENCNT		
STATEMENT OF CASH ON I	HAND			
CASH ON HAND at the beginning of the reporting perior committee. This amount MUST be the same a of the lest reporting period or must be zero if the	e the cash on hand at the end	\$ 205.63 /		
ADD TOTAL MONEY TAKEN IN THIS PERIO	Ю			
Schedule A: Cash Contributions total (Attach				
Schedule F: Loans Received total (Attach Sch	edule F)	174411114		
Schedule H: Total Sales of Campaign Propert	y (Attach Schedule H)			
(Schadule H apolles to Candidates)	Committees Only) SUB-TOTAL	205.63		
SUBTRACT TOTAL MONEY SPENT THIS P	ERIOD			
Schedule B: Expenditures total (Attach Sched	kile 8) (**also see debts and loans below)			
Schedule F: Loan Repayments total (Attach S				
CASH ON HAND at the end of this reporting period (if fi	nal report belance must be zero)	205.63		
**UNPAID BILLS (From Schedule D - Attach Schedule	D)	\$		
*IN KIND CONTRIBUTIONS (From Schedule E - Attack				
**OUTSTANDING LOANS (From Schedule F - Attach S				
CONSULTANT BREAKDOWN (Schedule G Attached?		YESNO		
CANDIDATE COMMITTEES ONLY:				
VALUE OF CAMPAIGN PROPERTY (From Schedule	⊣ - Attach Schedule H)	\$ <u></u>		

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

MITTEE NAME (Must be same as an Statement of Organization) mittee to Elect Chuck Larson E: This schedule reports money loaned to the committee which is deposited in the com		RESE		EDULE F v. 02/08)	LOANS RECEIVE & REPAI
		e committee account.		CHECK THIS BOY AMENDING FORM	
	NS RECEIVED <u>THIS REPORTING PERIOD</u> If loan, such as a bank, must be shown if a third party is in	volved. Include loans from	oendidate'	's personal	funde.)
DATE RECEIVED MM/DDYR)	NAME AND ADDRESS OF LENDER (Include Enderger's Name, If Applicable)	RELATIONSHII CANDIDATE (IF AP	olicable")	AMOUNT	OF LOAN
WHIRE DOT 1 TV				\$	
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ART I) - MONETARY (Loans forgive	LOAN REPAYMENTS MADE <u>THIS</u> REPORTING PERIO on must be reported on Schedule E In-kind Contribution	~		\$	NT DESAIA
ART I) - MONETARY (Loans forgive DATE PAID (MM/DD/YR)	LOAN REPAYMENTS MADE <u>THIS</u> REPORTING PERIO on must be reported on Schedule E In-kind Contribution NAME AND ADDRESS OF LENDER (Include Endowor's Name, If Applicable)	D	11P TO Applicable)		NT REPAID
(Loans forgive	NAME AND ADDRESS OF LENDER	D N	(IP TO Applicable)		NT REPAID
(Loans forgive	NAME AND ADDRESS OF LENDER	D N	11P TO Applicable)		NT REPAID
(Loans forgive	NAME AND ADDRESS OF LENDER	D N	41P TO Applicable)		NT REPAID
(Loans forgive	NAME AND ADDRESS OF LENDER	D N	(IP TO Applicable)		NT REPAID
(Loans forgive	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSI CANDIDATE* (Y.	Applicable)		
(Loans forgive	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONS CANDIDATE: (Y	Applicable)		